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JLS 1-24-19 FILED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 599058 , 4382480

AUTHORIZATION : Spelle Blessen

COST LIMIT : \$ 125.00

ORDER DATE: January 23, 2019

ORDER TIME : 1:40 PM

ORDER NO. : 599058-005

CUSTOMER NO: 4382480

FOREIGN FILINGS

NAME: GG88 HOLDINGS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:		ition Section of Corporations	3						
SUBJEC	GG CT:	88 Holdings LLC							
		Name of Limited Liability Company							
The encl Existence	losed "Ap	plication by Fore eck are submitted	ign Limited Liability Con to register the above refe	npany for Authoriz renced foreign lim	ration to Transa	ct Business in Florida," mpany to transact busin	Certificate of ness in Florida.		
Please re	eturn all c	orrespondence co	oncerning this matter to th	e following:					
		Eldon Griggs, C	hief Executive Officer	`					
Name of Person									
		GG88 Holdings	LLC						
		Firm/Company							
		2237 Broadhead	Place						
		Address							
	•	City/State and Zip Code							
	c	gsgriggs@earthli	nk.net						
			E-mail address: (to be use	ed for future annua	l report notifica	ntion)			
For furthe	er inform	ation concerning	this matter, please call:						
	Eldon G	riggs		859 at (312-6609				
		Name of	Contact Person	Area Code	Daytime	Telephone Number			
]	Division Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314			STREET AD Division of C Registration S Clifton Buildi 2661 Executive Tallahassee, I	orporations Section ing ve Center Circle			
			following amount: to: FLORIDA DEPAR	TMENT OF CT 4	TE				
		.00 Filing Fee	\$130.00 Filing Fee of Certificate of St	& □ \$155.00	Filing Fee & ied Copy	\$160.00 Filing F of Status & Cert			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Centucky	ame adopted for the purpose of transacting business in Flor		·	company, Like, or Li		
•	ich foreign innited liability company is organized)	3.	83-2201723 3. (FEI mamber, if applicable)			
;/urnanicuon under the law of wi	ach foreign ignated liability company is organized)		(FEI mumber, i	f applicable)		
January 14, 2019						
.	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605,0905, F.S. to determin	egistration.) re penalty li	sbilny)			
2237 Broadhead Place (Street Address of Principal Office)		2237 Broadhead Place				
		6	(Mailing Address)			
exington, KY 40515]	exington, KY 40515			
ame and street address	of Florida registered agent: (P.O. Box	NOT ac	ceptable)	12.5 12.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5 13		
Name:	Corporation Service Company		. <u></u>	RETARCI AHASSI		
Office Address:	1201 Hays Street					
				무점		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company
By:

(Registured agent's signature)

ASST. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Eldon Griggs ■ Manager Manager Manager 2237 Broadhead Place Address: ■ Member Member Address: ______ Lexington, KY 40515 Authorized ☐ Authorized Person Person Other____ Other Other___ Other _____ Name: Gladys Griggs Manager Name: Manager 2237 Broadhead Place ☐ Member **■** Member Address: Lexington, KY 40515 Authorized Authorized Person Person Other Other Other____ Other__ Manager Manager Member Address: Member ■ Authorized ☐ Authorized Person Person Other Other Other_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kenneth R. Sagan, as attorney for GG88 Holdings LDC

Typed or printed name of signee

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 211476

Visit https://app.sos.ky.gov/ftshow/certvalidate,aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

GG88 HOLDINGS LLC

is a limited liability company duly organized and existing under KRS Chapter 14A and KRS Chapter 275, whose date of organization is October 15, 2018 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 23rd day of January, 2019, in the 227th year of the Commonwealth.



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

211476/1036184